



**The Arkansas Supreme Court Historical Society, Inc.
Membership Form - Calendar Year 2015**

- _____ \$10 **Student**
- _____ \$25 **Individual**
- _____ \$75 **Non-profit organization or educational institution** (the entity may name up to 3 individual members)
- _____ \$500 **Partnership, corporation, or company** (the entity may name up to 10 individual members)
- _____ \$1,000 **Sponsor** (lifetime membership for natural persons only, payable in installments during a period not to exceed 5 years)
- _____ \$5,000 **Benefactor** (lifetime membership for natural persons, organizations, institutions, partnerships, corporations or companies; entity benefactors shall not be entitled to name individual lifetime members)

Name: _____

Address: _____

City: _____ **State** _____ **Zip** _____

Telephone: _____ **Email** _____

Please send your completed membership form and dues payment, to:

The Arkansas Supreme Court Historical Society, Inc.
Ava M. Hicks, Treasurer
625 Marshall Street, Suite 1500, Little Rock, AR 72201
Phone: 501-682-2147 / Fax: 501-682-6877
Email: ava.hicks@arcourts.gov

Dues should be submitted by check, payable to: ASCHS